

LAW
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Waldman et al.

Application No.: 10/766,364

Confirmation No: 2887

Filed: January 28, 2004

For: COMBINATION BASSINET,
CHANGING TABLE AND BEDSIDE
SLEEPER

Group: 3673

Examiner: Robert G. Santos

Our File: SIM2-PT003.1

Date: May 6, 2005

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Further to Applicants' Duty of Disclosure pursuant to 37 C.F.R. §1.56, Applicants wish to bring to the Examiner's attention the material cited on the enclosed PTO-1449 form.

Pursuant to Pre-Official Gazette Notice signed July 11, 2003 waiving the requirements under 37 C.F.R. § 1.98(a)(2)(i) for applications filed after June 30, 2003, copies of the cited U.S. documents have not been included.

05/10/2005 RMEBRAHT 00000038 10766364

01 FC:1806

180.00 OP

Applicant: Waldman et al.
Application No.:10/766,364

International Preliminary Examination Report, copy enclosed, in a corresponding International Application and that no item of information identified in the enclosed PTO-1449 form was known to any individual designated in §1.56(c) more than three (3) months prior to the filing of this Information Disclosure Statement.

It is respectfully requested that the Examiner consider these documents and return an initialed copy of the PTO-1449 form indicating his consideration of the cited material.

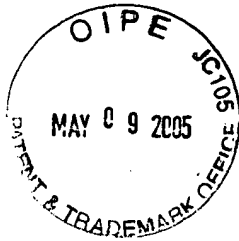
Respectfully submitted,

Waldman et al.

By Ryan W. O'Donnell
Ryan W. O'Donnell
Registration No. 53,401
(215) 568-6400

Volpe and Koenig, P.C.
United Plaza, Suite 1600
30 South 17th Street
Philadelphia, PA 19103

RWO/djw
Enclosures



Sheet 1 of 1

FORM PTO-1449 U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use several sheets if necessary)				ATTY. DOCKET NO. SIM2-PT003.1		SERIAL NO. 10/766,364	
				APPLICANT Waldman et al.			
				FILING DATE January 28, 2004		GROUP 3673	

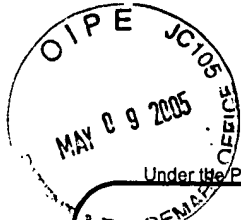
U.S. PATENT DOCUMENTS							
EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	EB	2005/0034232	02/2005	Martin			

FOREIGN PATENT DOCUMENTS								
		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
							YES	NO

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)		

EXAMINER	DATE CONSIDERED
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EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.



PTO/SB/21 (09-04)

Approved for use through 07/31/2006.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/766,364
	Filing Date	January 28, 2004
	First Named Inventor	Waldman et al.
	Art Unit	3673
	Examiner Name	Robert G. Santos
Total Number of Pages in This Submission	Attorney Docket Number	SIM2-PT003.1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	PTO-1449 Form and Copy of International Preliminary Examination Report
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	VOLPE AND KOENIG, P.C.		
Signature			
Printed name	Ryan W. O'Donnell		
Date	May 6, 2005	Reg. No.	53,401

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Ryan W. O'Donnell	Date	May 6, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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JC105-2005

PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180.00

Complete if Known

Application Number 10/766,364
Filing Date January 28, 2004
First Named Inventor Waldman et al.
Examiner Name Robert G. Santos
Art Unit 3673
Attorney Docket No. SIM2-PT003.1

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 22-0493 Deposit Account Name: Volpe and Koenig, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**
 - = x = 0.00 **Fee (\$)** **Fee Paid (\$)**
 HP = highest number of total claims paid for, if greater than 20 0.00
Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**
 - = x = 0.00
 HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**
 - 100 = / 50 = (round up to a whole number) x = 0.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
 Other: Submission of Supplemental Disclosure Statement 180.00

SUBMITTED BY

Signature Ryan W. O'Donnell Registration No. 53,401 Telephone 215-568-6400
 (Attorney/Agent)
 Name (Print/Type) Ryan W. O'Donnell Date May 6, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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